## PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number 10/530211

| CLAIMS AS FILED - PART I  |  |   |   |                                       |                  |                                    |      | SMALL ENTITY |                        |      | OTHER THAN          |                        |  |
|---|--|---|---|---------------------------------------|------------------|------------------------------------|------|--------------|------------------------|------|---------------------|------------------------|--|
| L   |  |   | (Colur                                      | ກດ 1)                                 | ,                | (Column 2)                         | _    | TYPE         | النا                   | OR   | SMALL               | ENTITY                 |  |
| U.  | S. NATIONA   |   |   |                                       |                  |                                    | RATE | FEE          |                        | RATE | FEE                 |                        |  |
| BA  | SIC FEE  |   | SMALL EN                                    | T. = \$ 150                           | LAF              | RGE ENT. = \$ 300                  | ]    | BASIC FEE    |                        | OR   | BASIC FEE           | 30                     |  |
| EX  | NOITANIMA  | EE  | Satisfies PCT (4) = \$ 5                    |                                       | All              | other situations = \$ 100 / \$ 200 | 7    | EXAM. FEE    |                        |      | EXAM, FEE           | 200                    |  |
| SE  | ARCH FEE   |   | U.S. is ISA =<br>ALL other co<br>\$ 200 / 3 | ountries =                            |                  | other situations = \$ 250 / \$ 500 |      | SEARCH FEE   |                        |      | SEARCH FEE          | 400                    |  |
| FE  | E FOR EXTRA  | SPEC. PGS.                                      | mir   | nus 100 =                             |                  | / 50 =                             |      | X \$ 125 =   |                        |      | X \$ 250 =          |                        |  |
| то  | TAL CHARGE   | ABLE CLAIMS                                     | 14 m  | inus 20 =                             | •                |                                    |      | X \$ 25 =    |                        | OR   | X \$ 50 =           |                        |  |
| INC   | DEPENDENT C  | LAIMS   | / n   | minus 3 =                             | *                |                                    |      | X \$ 100 =   |                        | OR   | X \$ 200 =          |                        |  |
| MU  | LTIPLE DEPE  | NDENT CLAIM PF                                  | RESENT                                      | SENT D                                |                  |                                    |      | + \$ 180 =   |                        | OR   | + \$ 360 =          | 360                    |  |
| * 1   | * If the difference in column 1 is less than zero, enter "0" in column 2 |   |   |                                       |                  |                                    |      |              |                        | OR   | TOTAL               | 1260                   |  |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)   |  |   |   |                                       |                  |                                    |      | SMALL E      | NTITY                  | OR   | OTHER<br>SMALL E    |                        |  |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT       |   | HIGHE<br>NUMB<br>PREVIO<br>PAID F     | ER<br>USLY       | PRESENT<br>EXTRA                   |      | RATE         | ADDI-<br>TIONAL<br>FEE |      | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus                                       | **                                    |                  | =                                  |      | X \$ 25 =    |                        | OR   | X \$ 50 =           |                        |  |
|   | Independent  |   | Minus                                       | ***                                   |                  | =                                  |      | X \$ 100 =   |                        | OR   | X \$ 200 =          |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                           |   |   |                                       |                  |                                    |      | + \$ 180 =   |                        | OR   | + \$ 360 =          |                        |  |
| •   |  |   |   |                                       |                  | <u> </u>                           |      | FEE          |                        | ÓR   | TOTAL ADDIT.<br>FEE |                        |  |
|   |  |   |   |                                       |                  |                                    |      |              |                        |      | •                   |                        |  |
|   |  | (Column 1)  CLAIMS  REMAINING  AFTER  AMENDMENT |   | (Columnia HIGHE NUMBE PREVIOL PAID FO | ST<br>ER<br>JSLY | (Column 3)  PRESENT EXTRA          | ſ    | RATE         | ADDI-<br>TIONAL<br>FEE |      | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus                                       | **                                    |                  | =                                  | ľ    | X \$ 25 =    | 7.                     | OR   | X \$ 50 =           |                        |  |
|   | independent  | •   | Minus                                       | ***                                   |                  | =                                  | ľ    | X \$ 100 =   |                        | OR   | X \$ 200 =          |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                           |   |   |                                       |                  |                                    |      | + \$ 180 =   |                        | OR   | + \$ 360 =          |                        |  |
|   | ····   |   |   |                                       |                  |                                    | . 1  | OTAL ADDIT.  |                        | OR   | TOTAL ADDIT.<br>FEE |                        |  |
|   |  |   |   |                                       |                  |                                    |      |              |                        |      |                     |                        |  |
| " If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |   |                                       |                  |                                    |      |              |                        |      |                     |                        |  |